

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>Ceint Gz</i>		<i>11-26-01</i>
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	<i>TR</i>	<i>1112</i>	<i>12/12/0</i>
RESPONSE FORMALITY REVIEW	<i>M.A.</i>	<i>830</i>	<i>03-22-01</i>
	<i>WJ</i>	<i>30900</i>	<i>05/31/02</i>
		<i>886</i>	<i>08-19-02</i>

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Date
Final Original	
1	✓
2	✓
3	✓
4	✓
5	✓
6	✓
7	✓
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Claim	Date
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If more than 150 claims or 10 actions  
 staple additional sheet here

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 12/3/02